

A&D/TBI – Waiver Services Supplemental – Specialized Medical Equipment and Supplies Service

The waiver includes adult day services, attendant care, case management, homemaker, residential based habilitation, respite care, structured day program, supported employment, behavior management/behavior program and counseling, environmental modifications, healthcare coordination, occupational therapy, personal emergency response system, physical therapy, specialized medical equipment and supplies, speech-language therapy and transportation. These are waiver services options that can be provided and will be services that people are receiving. Not everyone will be receiving the same services, however. Some will receive Physical Therapy or Transportation or Attendant Care, or some other service that reflects their needs.

The **Person Centered Compliance Tool** will be supplemented with the following tool depending on what waiver service the person is currently receiving. A review of the CCB/POC will determine what services the person has. The reviewer will determine by reviewing the CCB/POC and talking with the Case Manager the exact services the person has. By so doing, the reviewer will take the appropriate supplemental Provider Review Tool to complete the Review. The following is an example of that supplemental Provider Review Tool for a person who is receiving services: **Specialized Medical Equipment and Supplies**

A&D/TBI – Waiver Services Supplemental – Specialized Medical Equipment and Supplies Service

<p>Waiver Services: Specialized Medical Equipment and Supplies Waiver Assurances</p> <p>Recommended Probes</p>	<p style="text-align: center;">Discovery Mechanisms</p> <p>Discovery mechanisms are not meant to be inclusive. They are meant to be suggestions to gather information for the Reviewer. Guidelines are intended to help the Reviewer to make decisions about the presence or absence of the Indicators. The Discovery mechanisms listed here in no way imply they are meant to be directives for completion, or a requirement to be answered in every instance.</p>			
<p>Specialized Medical Equipment and Supplies: Desired Outcome: <i>Equipment and supplies are medically prescribed to enable the individual to function with greater independence in their home.</i></p>		<p>Spending Time With People (Initially during the conversation with the person using the Personal Outcome Measures®, then throughout the Review process.)</p> <p>Examples only: specific situations may change observations.</p>	<p>Conversations With People Selected Examples only: specific situations may change conversations with people.</p>	<p>Review of Documents Examples only: specific situations may change documents needing review.</p>
<p>Equipment and/or supplies are present</p>	<p>MES I.A.1 Medical equipment and supplies are identified in an individual’s POC/CCB.</p> <ol style="list-style-type: none"> 1. Is the equipment and supplies listed as needed on the CCB/POC, present for the individual’s use? 2. Is the equipment in working order? 3. Has maintenance been performed as required in the CCB? 4. Is Liability Insurance and warrantee information current for any equipment provided? 	<p>Observe for presence and working condition of equipment/supplies.</p>	<p>Ask the individual if the equipment and supplies are present, and in working order.</p> <p>Ask the individual how the equipment and supplies meet their health needs.</p>	<p>Review the authorization of equipment and supplies in the CCB/POC</p> <p>Review any documentation regarding liability insurance and warrantee information regarding any equipment present.</p>